INSTRUCTOR CERTIFICATION PROGRAM
INSTRUCTIONAL LOG

WSCJTC
Washington State Criminal
Justice Training Commission

Instructor: _____ **Date:**_____

Seminar/Training Course Title	Date of Instruction	Location	Number in Attendance	Number of Hours Taught

Note: **To re-certify, you are asked to teach a minimum of two (2) classes in the last 24-month period. A copy of this log should be presented when you come up for renewal.**